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UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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Bib Data Sheet

CONFIRMATION NO. 9487

SERIAL NUMBER 09/929,760	FILING DATE 08/14/2001 RULE	CLASS 379	GROUP ART UNIT 2643	ATTORNEY DOCKET NO. 191910-1111
APPLICANTS Scott E. Hrastar, Duluth, GA; Roy A. Bowcutt, Alpharetta, GA;				
** CONTINUING DATA ***** THIS APPLICATION IS A CON OF 08/835,916 04/10/1997 <i>yes NR</i> WHICH CLAIMS BENEFIT OF 60/035,618 01/17/1997				
** FOREIGN APPLICATIONS ***** <i>same NR</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/31/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Allowance <i>Mehar R</i> Acknowledged Examiner's Signature Initials		STATE OR COUNTRY GA	SHEETS DRAWING 3	TOTAL CLAIMS 9
				INDEPENDENT CLAIMS 1
ADDRESS Scientific Atlanta, Inc. 5030 Sugarloaf Parkway Lawrenceville, GA 30044				
TITLE Two-tiered authorization and authentication for a cable data delivery system				
FILING FEE RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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CONFIRMATION NO. 94

SERIAL NUMBER 09/929,760	FILING DATE 08/14/2001 RULE	CLASS 725	GROUP ART UNIT 2611	ATTORNEY DOCKE NO. 191910-1111
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APPLICANTS

Scott E. Hrastar, Duluth, GA;

Roy A. Bowcutt, Alpharetta, GA;

** CONTINUING DATA *****

This application is a CON of 08/835,916 04/10/1997 PAT 6,324,267
which claims benefit of 60/035,618 01/17/1997

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 08/31/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	GA	3	9	1

ADDRESS

Scientific Atlanta, Inc.
5030 Sugarloaf Parkway
Lawrenceville, GA
30044

TITLE

Two-tiered authorization and authentication for a cable data delivery system

FILING FEE

RECEIVED
1094FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT
No. _____ for following:

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees (Filing)
<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
<input type="checkbox"/> 1.18 Fees (Issue)
<input type="checkbox"/> Other _____
<input type="checkbox"/> Credit _____